



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1074

Name in full Augustine Heam Age 19
 Address 119 Signal Hill Road
 Married Single Height 5-3 Weight 118
 Color _____ Hair _____ Eyes _____

Other distinguishing marks _____

Nearest relative Mrs Sarah Heam (Mother)

Address 119 Signal Hill Road

Dependents Mother

Occupation Labourer Present Wage \$18⁰⁰ a week

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment 23rd January 1915

I, Augustine Heam, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against His enemies and opposers whatsoever, according to the condition of my service.

Re-engage at Aldershot 15th Feb 1915
Augustine Heam
1074

Declared before me this 12th day
 of Feb 1915

Em Sheapt

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Reg. No. 1024

Name Augustine Hoarn

Apparent age 19 years months. Height 5 feet 3 inches.

Chest measurement { Girth when fully expanded inches.
 Range of expansion inches.

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Sarah Hoarn, 119 Signal Hill Rd., St. John's
 | Relationship Mother

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pens on years days	Service in Re-allowance to reckon towards G. C. Pay years days	Signature of Officers certifying correctness of entries
Service towards limited engagement reckons from <u>23/1/15</u>							}
Joined at <u>St. John's</u> on <u>23rd January '15</u>							
Total Service forfeited as above							
Total Service towards Engagement to (date of discharge) .. years .. days							
" " " Pension (") .. " .. "							

A. Hearn

1024.

P. + P. 6,



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Augustus Hearn, Regl. No. 1024
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and Fifty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} ~~or~~ _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} ~~or~~ _{or} Persons
 concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
930	Mother (Mrs)	Sarah Hearn	119 Signal Hill Rd.	50
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) Eric Shiple
 Officer Commanding
 Company St John's

(Sig.) Guss Hearn
 (Rank) Private

MAR - 8 1915

Table II.—Only for admissions to hospital or to the sick list in the case of Warrant Officers treated in quarters

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
City of London, m. b. } Stops, & Clapton S	11	7	16	23	8	16	Sh. Head	44	Discharged to duty. (Clause A)	H. H. [Signature]

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
Sr John W. Ford	Jan 23 15	20 Mar 15			
T.S. "Stephano"	20 Mar 15	22 Mar 15			
T.S. ORDUNA	22 Mar 15	30 Mar 15			
Edinburgh Castle	30 Mar 15				

Admitted to Hospital 11 July 1916

Army Form W. 3016.

No. _____

Date 23 Aug 1916

(1) To the Officer i/c Records,

Newfoundland contingent
58 Victoria St SW (Station).

(2) The Officer Commanding,

Newfoundland Cont.
Avon (Station).

(3) The Paymaster,

Newfoundland Cont.
58 Victoria St SW (Station).

Regimental No. 1024

Rank and Name

Pte Augustus Neave

Regiment or Corps

1 Newfoundland Contingent - D Coy

has been granted a furlough from

23-8-16 to 1-9-16

His address while on leave will be:—

4 Waverley Hotel
Edinburgh.

I consider he is fit for *

~~Light~~ ^{Duty.}

Geo Water
Caro Ramb

ja Officer in charge MILITARY HOSPITAL Hospital,
42, CLIFDEN ROAD,
— CLAPTON, N.E. —

(Station).

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.

18th, May 1944 8

7814/1/B&E

Mrs. William Hearn,
117, Signal Hill Road,
St. John's, Newfoundland,

FM/WF

1024, PTE. AUGUSTINE HEARN,
ROYAL NEWFOUNDLAND REGIMENT.

With reference to your letter 24/4/18 (4441), relating to the Estate of the above named Soldier, who was reported Missing 14/1/17, and presumed dead 10/11/17: Statement of his account ~~in Pay Book~~ will be forwarded to the Minister of Militia within a few days.

It is regretted that owing to the pressure of work, this Statement could not have been sent before.


Capt.
Asst. Paymaster,
For Ch. Paymaster & O i/c Records.

St Johns

Nfld

April 24th 1918

Capt Finnewell of pay and
record office.

Dear Sir

7814/1/1

I am more than
sorry to have to trouble you
but I must. I called at
the war office yesterday. To
enquire about the account
of my son Pte Agueline Hearn
1024. D Company 1st Nfld Reg.
He was reported missing April
14th 1917 reported 10th of November
believed to be killed on that
date. The paymaster
told me there was no account
came in yet. I thought you

would be kind enough to
let me know if there was
any money there belong to
him. I only get the amount
he left me fifteen dollars
per month.

I am

Yours Truly
Mrs. Hearn

Mrs Wm Hearn
117 Signal Hill rd
St Johns Nfld

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.		
Ref. Nos IN	4441	
Rec'd	6 MAY 1918	
Ack'd	Ans'd	
Ref. Nos. UU	7814/1	
ACCTED UPON		
EXACT	DATE	BY
Comd		
P & R	10/5/18	Thie
R & C		
B & F		
P.S.		

CITY OF LONDON
MILITARY HOSPITAL
42, CLIFDEN ROAD,
— CLAPTON, N.E. —

10/19/16
Pte Hearn has permission to draw up to two pounds
on account of his pay.

Genl. V. S.
Capt. H. V. C.

Office Copy.

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 1024

Rank

Private

Name

Hearn, A.

Died (or Intestate)

at

France

on the

14 of April

1917.

Deserted at

on the

of

191 .

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14 4/17	8	13	4
	Cash issues (Date of each issue to be stated)				Pay days at from to			
		£	s.	d.	Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	"				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	Consolidated stoppage				Deferred Pay or Gratuity			
	Balance due by the Paymaster	8	13	4	Balance due to the Paymaster			
		£	8	13	4			

CHECKED.

18/5/18

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 8 13 4 is correct and payable against the Public.

Dated at

this

day of

20 MAY 1918

191

Paymaster.

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

Hearn, A.

1024

Ray Sept.

ORIGINAL

Army Form O

PAY LIST

to

191. . . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or Coy. **ROYAL NEWFOUNDLAND REGIMENT.**

No. **1024**

Rank **Private**

Name **A. HEARN**

Died ^{Intestate} **MISSING 14/4-17.**

on the **14** of **April** **1917.**

Deserted at **PRESUMED DEAD 17-11-17**

on the of **1917.**

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/4/17	8	13	4
	Cash issues (Date of each issue to be stated)				Pay days at from to			
		£	s.	d.	Proficiency, Service or good conduct pay days at from to			
	"	191			Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	8	13	4	Balance due to the Paymaster			
		£				£	8	13
								4

This account is in accordance with information received at the Pay & Record Office to **1615/178** and is therefore subject to amendment if, and as may be found necessary.

CHECKED.

[Signature]
16/5/18

I hereby Certify that the above account is correct in every particular and that the debit balance of **£ 8 13 4** is correctly chargeable against the Debitors.

Dated at

this day of **20 MAY 1918** 191



NEWFOUNDLAND CONTINGENT,

CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS.
[Signature]
Paymaster.

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B: 2090 or Army Form O: 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL

Army Form O. 1625.

PAY LIST.

to

191. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or Coy **ROYAL NEWFOUNDLAND REGIMENT.**

No. 1024 Rank **Private** Name **A. Hearn**

Died (or estate) **MISSING 14/4-17.** on the **14** of **April** 191 **7.**

Deserted as **PRESUMED DEAD 17-11-17** on the of 191 .

I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.		Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/4/17	8	13		4
	Cash issues (Date of each issue to be stated)				Pay days at from to				
	£ s. d.				Proficiency, Service or good conduct pay days at from to				
	191				Messing allowance days at from to				
	"				Kit allowance				
	"				Amount produced by the sale of Effects from Form 2				
	"								
	Consolidated stoppage								
	Balance due by the Paymaster	8	13	4	Balance due to the Paymaster				
		£	8	13		£	8	13	4

This account is in accordance with information received at the Pay & Record Office to **16/5/18** and is therefore subject to amendment if, and as may be found necessary.

CHECKED.
A.C.
16/5/18

I hereby Certify that the above account is correct in every particular and that the **NEWFOUNDLAND CONTINGENT,** debtor balance of **2** ~~is correctly chargeable against the Contingent~~

Dated at this day of **20 MAY 1918** 191



A.C. Munn
Paymaster.
CHIEF PAYMASTER & OFFICER IN RECORDS.

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or Corps **ROYAL NEWFOUNDLAND REGIMENT.**

No. **1024** Rank **Private** Name **A. Hearn**

Died (a) **Intestate** at **France** on the **14** of **April** 191 **7**

Deserted at **MISSING 14/4-17.** on the of 191 **1**

I Certify that the above is correct in every particular.

PRESUMED DEAD 17-4-17

(Commanding Squadron, Troop,
Battery or Company.)

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. <u>last month</u> 14/4/17	8	13	4
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	"							
	Consolidated stoppage							
	Balance due by the Paymaster	8	13	4	Balance due to the Paymaster			
		£				£	8	13 4

This account is in accordance with information received at the Pay & Record Office to **16/5/17** and is therefore subject to amendment if, and as may be found necessary.

CHECKED.

16/5/17

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ **8 13 4** is ~~correctly chargeable against the Contingent~~ **NEWFOUNDLAND CONTINGENT,**

Dated at this day of **20 MAY 1917** 191



A. D. Munnell Maj.
CHIEF PAYMASTER & OFFICER IN CHARGE

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B-2090 or Army Form O-1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

DUPLICATE MAIL COPY

Army Form O, 1625

PAY LIST.

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or Corps **ROYAL NEWFOUNDLAND REGIMENT.**

No. **1024** Rank **Private** Name **A. Hearn**

Died (a) **intestate** at **France** on the **14.** of **April** 191 **7**

Deserted at **MISSING 1/4-17.** on the of 191 **.**

I Certify that the above is true in every particular.

PRESUMED DEAD 1/4-17

(Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. <u>last month</u> 14/4/17	8	13	4
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	8	13	4	Balance due to the Paymaster			
		£				8	13	4

This account is in accordance with information received at the Pay & Record Office to **1615118** and is therefore subject to amendment if, and as may be found necessary.

CHECKED.
[Signature]
16/5/18

I hereby Certify that the above account is correct in every particular, and that the **NEWFOUNDLAND CONTINGENT**,
debtor balance of

Dated at this day of **20 MAY 1918**



[Signature]
191 **PAID PAYMASTER & OFFICER IN CHARGE**

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with the Form B 2090 or Army Form O, 1815.
- (b) Words in Italic to be struck out when there is no debtor balance.

Admitted to Hospital
11th July 1916



Army Form W. 3016.

No. _____

Date 23rd August 1916

(1) To the Officer i/c Records,

Newfoundland Contingent,

53 Victoria St., S.W. (Station).

(2) The Officer Commanding,

Newfoundland Regt,

Ayr. (Station).

(3) The Paymaster,

53 Victoria St.,

S. W. (Station).

Regimental No. 1024

Rank and Name Pte Augustus Hearn

Regiment or Corps 1st Newfoundland

has been granted a furlough from 23/8/16 to 1/9/16

His address while on leave will be:—

c/o Waverley Hotel,

Edinburgh.

I consider he is fit for Duty. Light duty. Duty.

(Sgd) G. V. -----, Capt. R.A.M.C.,

for Officer in charge City of London Hospital,
Military

42 Clifden Road, (Station).

* Strike out that which is inapplicable Glapton, N.E.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 51.77

Aug 26th 1918

Received from the First Newfoundland Regiment
the sum of Fifty one 71 Dollars.
~~on account~~ of Pay. Estate
balance

Mrs. Heav

Ch. No. 8630	Initials E.H.
Pay Ledger 82	Initials W.H.
Gen. Ledger	Initials

Regtl. No. Rank

No. 1024.

Re-
Rank Hearn A.

Name

William Hearn

St Johns.

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records;

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.



NO STAMP REQUIRED

Dept. of Militia,

St. John's.

1024

.....1921

(820)

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late *1024* Rank *Private*.....
Name *Augustine Hearn*.....
Royal Newfoundland Regt.

Mrs Sarah Hearn.....(Sgd.)

Mother..... Relationship.

Address *117 Signal Hill Rd,*.....
City

C. 1024

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1024 Name Augustine Hearn.

CP

Witness. _____

Date Dec 6th 1919

Place St. John's, Nfld.

C.R. 1024

March 8th
St John's Nfld

W. F. Dill
City

Dear Sir:

Received scroll in
memory of Augustine, with
many thanks for same
I remain Respectfully Yours
Mrs W. Hearn

Extract of Communication received from Pay & Record
Office, London, date October 15, 1917.

#1024 Pte. A. Hearn.

Posted as "Missing" 14/4/17. and presumed Dead for
official purposes 17/11/17/

Extract of Cablegram received from Pay & Record
Office, London, dated May 13, 1917.

#1024 Pte. A. Hearn, D. Co.,

Reported "Missing" April 14th.

~~May 13,~~ 1917.

Dear **Hagan,**

I regret to inform you that a report has been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 1024, Private Augustine Hearn,

has been posted as **missing April 14th.**

Should any further information be received concerning him, the same will be at once communicated to you.

Yours faithfully.

Mrs. Sarah Hearn,

119 Signal Hill Rd.

Colonial Secretary.

C.R. 1024

Extract from Nominal Roll of R214. Regt. Draft No. 16
from 2nd In. Depot, to 1st In. B.S.F. embarked south-
ampton, 30-12-16.

1024 Pte. A. Hearn.

C.R.

1024

Extract from Nominal Roll Draft (All Ranks) to 1st
Bn. B.E.F. Embarked Southampton.

1024 Pte. A. Hearns.

30-12-16.

C.R. 1024

Extract of Casualties received from Pay & Record Office,
London, dated July 31, 1916.
(Extract from Army Form B 213, from O.C. 1st Hfld. Regt.
dated 11/7/16.)

#1024 Pte. A. Hearn.

Wounded in Action 1/7/16.

C.R. 1024

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&.R.O.
July 17th. 1916.

1024, Pte A. Hearn. ✓

1 Newfoundland D. GSW Head Adm. 2 Can. Gen. Hos.
Letreport 3rd July 1916.

C.R. 1024

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&.R.O.

July 14th. 1916

1024, Pte A. Hearn. ✓

1 Newfoundland R. GSW. Head.

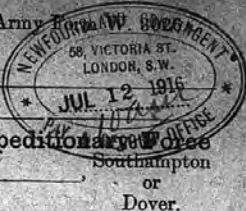
Dis to Base ex 6 Sty. Hos.

Havre 3rd July 1916.

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form



City of London Military HOSPITAL, at Clapton N.E.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * France

Expeditionary Force

admitted on 11th. July, 1916 from Hospital Ship

* Here insert which Expeditionary Force.

Southampton or Dover.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

(a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.

(b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., not later than the day after admission; envelopes to be marked C. 2, Casualties: rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
1024	Private	Hearn, Augustus	Newfoundland Cont.	G.S.W.Head. Slight.
			O.i/c (Sd.) City of London Military Hospital.	Major R.A.M.C.,

CR/1024

C.R. 1024

Extract from Nominal Roll of "D" Co. 1st Bn. MFLd. Regt.
Embarked at Devonport for Active Service, 20-8-15.

1024 Pte. G. Hearn.

Disembarked Alexandria 31-8-15 Proceeded to Abbassia,
Cairo. same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 1024

Extract from Nominal Roll of Draft embarked for Overseas
per S.S. Stephano March 20th 1915.

No. 8. Platoon.

1024 Pte. G. Hearn.

C.R. 1024

Agustine Hearn

was attested for General Service
Jan. 23rd 1915.

with the NEWFOUNDLAND REGIMENT on

Regimental No. 1024 was allotted to Pte A. Hearn.

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

Casualty Form—Active Service.

377

Regiment or Corps Newfoundland
 Regimental No. 1024 Rank Pvt Name Hearn G.
 Enlisted (a) Jan 13/15 Terms of Service (a) 1 Year Service reckons from (a) Jan 13/15
 Date of promotion to _____ Date of appointment _____ Numerical position on _____
 present rank _____ to lance rank _____ roll of N.C.Os. _____
 Extended Discharge of War Re-engaged Aug 15/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 24, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 26, or other official documents.
Date	From whom received				
		Embarked St. John's, NFLD.		20.3.15	
		Disembarked Alexandria		1.9.15	
		Embarked for Gallipoli		13.9.15	
		Embk'd Port Suez		14.3.16	
		Disembk'd MARSEILLES		22.3.16	
	2 Capt. Canadian	In into Eng	of	Station 9/16	to 30 03
					<p><u>Alberk</u> CAPTAIN. FOR O.I.C. INFANTRY RECORDS G. H. Q.; 3rd ECHELON.</p>

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form - Active Service

C.R. 2290

Rank Pte Regiment or Corps 7th Buffers
 Surname Dean Christian Name Augustine
 Religion R. C. Age on Enlistment 19 years — months.
 Enlisted (a) St. John's Terms of Service (a) War Service reckons from (a) 23 / 1 / 15
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____



Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 26, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 26, or other official documents
Date	From whom received				
			Embarked <u>Southern 30/12/16</u>		
			Disembarked <u>Geneva 3/1/17</u>		
			<u>1st Battalion</u> <u>17 JAN 1917</u>		
			<u>with BATT. 25. I. 17</u>		
<u>30.3.17</u>	<u>Sq F.A.</u>	<u>A.D. Influenza</u>	<u>France</u>	<u>15.3.17</u>	<u>E.D. 1754</u>
<u>5 APR 1917</u>	<u>OC. En.</u>	<u>MISSING</u>	<u>France</u>	<u>14 APR 1917</u>	<u>B 213</u>
			<u>Salisbury</u>		

[Handwritten signature]

[Handwritten signature]

O/C No 1 Reg Infantry Section
 G.H.C. 3rd Echelon

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoen-Smith, &c.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[12] W 9043/1125 100m 1274as 23 56

Forms
B. 121
49.

Regiment of *Newfoundland*

Signature of O. C. Company

Number of *100*
J. W. March
Capt

Regimental Number and Name <i>1024 Beam & Co.</i>		Enlistment		Trade <i>Laborer</i>	Good Conduct Badges, Service Pay or Proficiency Pay
No.	Age on <i>19</i> years - months	Place and Date of Enlistment	Religion		
Joined <i>1915</i>	Date <i>19-8-15</i>	<i>St Johns</i>	<i>R. Catholic</i>		
Joined <i>1915</i>	Date <i>2-9-15</i>	<i>Jan 28 1915</i>			
Joined	Date	Period of <i>with Colours 2 1/2 years.</i>	Place of Birth		
Joined	Date	<i>with Reserve 2 3/4 years.</i>	<i>St Johns</i>		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order discharging with trial	By whom awarded	REMARKS
<i>Edinburgh East</i>	<i>26/4/15</i>	<i>Plt</i>		<i>Absent from defaulters parade 7:30pm - 9:30pm</i>	<i>Do Sgt. Gherne</i>	<i>3 days BB</i>	<i>27/4/15</i>	<i>Capt. March</i>	<i>SR</i>
<i>do</i>	<i>27/4/15</i>	<i>"</i>		<i>Absent from defaulters parade 5:30pm - 9:30pm</i>	<i>do</i>	<i>7 days BB</i>	<i>28/4/15</i>	<i>Lt. Col. Burton</i>	<i>SR</i>
<i>do</i>	<i>28/4/15</i>	<i>"</i>		<i>Breaking out of Barracks whilst a defaulter</i>	<i>Capt. March</i>	<i>48 hrs. detention</i>	<i>29/4/15</i>	<i>do</i>	
<i>do</i>	<i>8/5/15</i>	<i>"</i>		<i>absent from parade 12:25</i>		<i>1 day CB</i>	<i>10/5/15</i>	<i>do</i>	<i>2 Hrs</i>
<i>Stobs</i>	<i>13/5/15</i>	<i>"</i>		<i>absent from Church parade.</i>	<i>Cpl Beckung</i>	<i>2 days C.C.</i>	<i>14/5/15</i>	<i>Capt. J. March</i>	<i>2 Hrs</i>
<i>Market Racecourse</i>	<i>19/5</i>	<i>"</i>		<i>Swearing and C.O.</i>	<i>Sgt. Bellows</i>	<i>3 days C.C.</i>	<i>19/5</i>	<i>do</i>	<i>2 Hrs</i>
	<i>27-9</i>	<i>"</i>		<i>absent from 6:45 am parade</i>	<i>Cpl Taylor</i>	<i>4 days C. B</i>	<i>28-9</i>	<i>4 days C. B</i>	<i>2 days C. B</i>
	<i>28-9</i>	<i>"</i>		<i>absent from 2 1/2 pm parade</i>				<i>Capt. Russell</i>	<i>by R. W. J. S.</i>
		<i>"</i>		<i>Refusing to obey an order from N.C.O</i>	<i>Sgt. Taylor</i>				
<i>Ayr</i>	<i>30/9/16</i>	<i>Pte</i>		<i>not answering drill call from 8 to 9:30 pm</i>	<i>Sgt Walsh</i>	<i>1 day C. B.</i>	<i>1/10/16</i>	<i>Capt. Russell</i>	<i>H.S.</i>
				<i>To be carried over</i>					
				<i>Missing</i>					<i>14 1/2</i>

Army Form B. 121.

Brought forward

24.							
Excuse	13/11/16	P.K.	Leaving bath without permission & returning drunk at 3.45 p.m.	Capt Taylor	9 hrs detention	14/11/16	Major Bernard M.C. C.C.B.
	2/12/16		Absent from town picket 7 p.m. 2/12/16 when warned next morning that picket would be suspended from when it started	Capt Taylor	7 days C.B.	4/12/16	Capt Russell forfeit 1 day for R.W. R.H.
Excuse	4/12/16			Capt Taylor	7 days C.B.	4/12/16	
Excuse	4/12/16		Not answering defaulters call from 7 p.m. to 9.30 p.m.	Capt Jupp	7 days C.B.	4/12/16	Capt Karu. forfeit 1 day for R.W. R.D.R.

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. FILE

Ottawa Ont

Date Oct 17/62

Attention of

NAME FOWLOW, William.

Dept of Veterans Affairs
Service Records
OCT 18 1962

SERVICE NUMBER 1025 ROY. NFI P.C. No. 260699
REGT. WW1 W.V.A. No. 52522

NAVY
ARMY x
R.C.A.F.

The DEPARTMENT has received information from

S.P.M.E. St. John's Newfoundland. Oct 12/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Oct 12/62
Cause of Death _____
Place of Death Home for the Aged and Infirm.

Name and Address of next of kin (if known) _____

Copies to: W.S.R.
V. I.
~~PCY~~
~~DC~~
H.O.

} Destroy form if advice of death already received.

J. M. Meenan
for
Chief, Central Registry



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1075

Name in full William Bowlow Age 34

Address 35 Back Street

Married Single Height 5-6 Weight 140

Color Blue Hair Black Eyes Blue

Other distinguishing marks Tattoo mark; woman's head. Left arm.

Nearest relative Mrs. Mary Ellen Bowlow (wife)

Address 35 Back Street

Dependents One child

Occupation Barkeeper Present Wage \$9.00 per week

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment 3rd January, 1915

*Re Enlistment
Admitted
Witness
Capt. M. Murphy*

I, William Bowlow, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

*Witness
Capt. M. Murphy*
William Bowlow
mark.

Declared before me this 12th day of Feb. 1915

*Witness
M. Murphy*

Ensign Capt -